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	FC:1501 1400.00 OP FC:1504 300.00 OP FC:8001 18.00 OP				Jennifer H. Payne (Depositor's name)			
					Jein	1 1 1 1 1 1		
40						MILL	(Signature)	
					Aft	gust 14, 2006	(Date)	
	APPLICATION NO.	APPLICATION NO. FILING DATE FIRST NAMI		D INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.		
	10/035,597	10/035,597 10/18/2001			Lyons	13625-002001/107809 2866		
	TITLE OF INVENTION: REAL TIME PHYSICAL SYSTEM MODELLING WITH PREDETERMINED OUTCOMES							
	APPLN. TYPE	SMALL ENTITY	ISSUE FEE		PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE	
	nonprovisional	NO	\$1400		\$300	\$1700	09/11/2006	
ı	EXAMINER		ART UNIT		CLASS-SUBCLASS			
				13	463-016000	•		
	CFR 1.363). [] Change of correspon Address form PTO/SB/1 [] "Fee Address" indica] Change of correspondence address (or Change of Correspondence ddress form PTO/SB/122) attached.] "Fee Address" indication (or "Fee Address" Indication form TO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer			2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. 1. Fish & Richardson P.C. 2			
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assigner previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE (CITY and STATE OR COUNTRY) Aristocrat Technologies Australia Pty Ltd Lane Cove, NSW, Australia								
-	Please check the appropriate assignee category or categories (will not be printed on the patent): [] individual [X] corporation or other private group entity [] government							
	4a. The following fee(s) are enclosed: [X] Issue Fee [X] Publication Fee (No small entity discount permitted) [X] Advance Order - # of Copies				 4b. Payment of Fee(s): [X] A check in the amount of the fee(s) is enclosed. [] Payment by credit card. Form PTO-2038 is attached. [X] The Director is hereby authorized to charge the required fee(s), or credit any overpayment, to Deposit Account Number <u>06-1050</u> (enclose an extra copy of this form). 			
•	5. Change in Entity Status (from status indicated above) [] a. Applicant claims SMALL ENTITY status. See 37 CFR 1.2.7. [] b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).							
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	(Authorized Signature) Typed or Printed Name Scott C. Harris				(Date) August 14, 2006			
					Registration No32,030			
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